

*We are in the early phases of a vast campaign for the reconsideration and reconstruction of the American way of life . . . In the process we shall clarify the goal values of America; this very process may well prove to be one of the great preventives of mental disability.*

## Mental Health and American Values\*

AT NO TIME in our history has there been such a crescendo of demand for the cure and prevention of mental disease and defect. Traditionally the health of our people has been a concern of local rather than state or federal government. Today we are not allowing precedent to stand in the way of programs at every level. Opinion has so changed that political parties, pressure groups and other voluntary associations are actively committed to the cause.

Why all this concern for the obvious? A stranger might exclaim in amazement that we have suddenly fallen in love with a platitude. The maxim about a sound mind in a healthy body has been with us as long as the maxim about the poor. As the gross annual product of our economy moves into the hundreds of billions of dollars we are putting an end to extreme poverty. We are beginning to think of putting an end to mental disease and defect.

We are in love with a platitude because mental disease is more dangerous than ever. Unhealthy minds can do more damage today than they could do even a few short years ago. We are

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also making the discovery that unhealthiness of mind is more pervasive and destructive than we ever dreamed. To put it bluntly: We may not be crazier than ever; but it is crazier than ever to tolerate craziness. It is courting disaster to allow mental disease and defect to co-exist with modern science and technology.

Infirmities of the mind are themselves serious deprivations of human values. They are deprivations of mental and physical integrity—of well-being. It offends our conception of human dignity to put up with remediable and preventable damage to the mind.

Our objection goes further. Mental disease and defect have formidable implications for well-being in all its forms. Mental aberrations and limitations have consequences for every value with which we are concerned.

### Threats to Life and Limb

Think first of mental disability in relation to current threats to life and limb. We live in perpetual peril of world disaster. We have ringed the Soviet around with bases in order to deter,

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detect, and hopefully to intercept attack; also, to launch instantaneous counterattacks. In turn our factories and homes are under Soviet surveillance. Our cities are dots on the target maps of the Red air and missile forces. This is Cold War. It is a War of Nerves. Always it is Near War.

Does anyone deny that it is hazardous to rely upon mentally diseased or defective spotters looking at the radar screens mounted at our observation posts? It is obvious that perception needs to be unclouded by fantasy, that judgment should not be distorted by perversities of motivation, and that action ought to be under continuous control. We are only too well aware of the aberrations of neurotics, psychopaths, and psychotics, and we know the leeway in our present methods of screening personnel. In the mind's eye we can review the pyramid of possible error in the chain of men and machines that begins with the primary observer and continues through interpreters, commanders, and advisers as it mounts to higher and higher levels until we reach national headquarters, the General Staff, the Commander-in-Chief, the National Security Council, the Cabinet, top figures in the Senate and House, or in the political parties, pressure groups, the press and the public generally (if there is time). We are not blind to the menace of misperceptions that see enemy "blips" on the screen where there are no "blips," or fail to read what is there. We recognize the potentiality of panic when good judgment requires pause; or of dilly-dallying through paralysis of will when life and death hang on split second timing.

On a less formidable level we are becoming aware of the everyday cost of mixing emotional instability with the automobile. In recent years we have begun to discover some of the hidden

motivations that operate in this area. We have learned of the "accident prone" driver whose car is a chariot of destruction—of himself and others. The manslaughtering motorist or pilot seldom fits the ancient image of the "madman." Too often he looks like thee and me.

We are coming to detect the hidden hand of mental disease in industrial accidents. Those mutilated fingers, crushed feet, and scorched eyes are not always matters of defective machinery. Thousands of such accidents appear to be traceable to the misperceptions and to the clumsiness of warped personalities.

Then there are all those accidents in the home. "The nervous housewife" does not always break an arm on the side of the bathtub, or accidentally electrocute an unwanted child, or accidentally put arsenic in her unwanted husband's hash. But we are beginning to discern the undercurrent of hidden destructiveness that frequently finds clandestine expression in these occurrences.

#### **Complex Manifestations of Mental Disease**

As we are made better acquainted with the factors leading up to injury and death it appears that it is not enough to focus exclusively upon the organism and to neglect its environment, especially the social environment. And this brings into the picture the routines of culture. We know that homes turn out "neurotics" and "psychopaths" as well as healthy young people. This is part of our culture pattern. It is also part of our culture if we select victims of mental illness or defect to serve as prison guards, attendants in mental hospitals, sergeants in the armed forces, or the police; it is part of the culture if some of these men take pleasure in breaking the jaw or kicking

the groin of a prisoner, a patient, or an enlisted man.

The complex roots and manifestations of mental disease are especially evident in the relations that prevail between the sexes. The demented rapist and torturer does in fact exist. But the frequency is as nothing compared with the less drastic brutalities that occur in relations between the sexes. The sequence that lies behind such pathological manifestations are part of the fabric of American culture. A pathological response is often fed by distortions acquired in the home, confirmed on the playground and at school, and expressed in assaults made upon the body of the sexual partner in order to overcome anxieties connected with the sexual role.

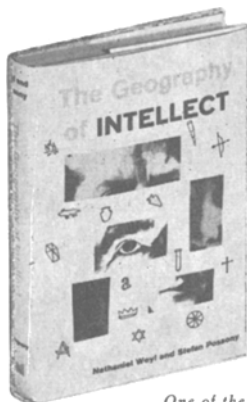
It is increasingly clear that an act of brutality is often a joint product of interaction. The maxim says that it takes two to make a fight but folklore does not see that the "passive" target is often as sick as the "aggressor." The demand to be bruised, maimed, or even killed provides the clue to many casualties.

Suitably modified we are told that the same point applies to much of the mayhem committed in the interactions of parent and child, child and child, gang and gang. Professors Whiting and Child, for instance, reminded us recently that American culture is more accustomed to train people to slap, beat, and otherwise to impose severe corporal punishment upon children than several cultures of which we have knowledge. Under the circumstances the probability is high that the culture will form a number of persons who take extreme joy in imposing and in enduring cruelty.

Think of our rapidly expanding knowledge of the important role played by "psychosomatic" factors in the ordinary infirmities of the flesh. (Or, more

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accurately, the "socio-psychosomatic" factors.) There is ample evidence of the frequent incidence of such factors in disorders of the organ systems (the circulatory, gastro-enteral, genito-urinary, and so on). At the moment I shall go no further along this line. But the important point is that psychopathological factors inflict vast deprivations with effects that are traditionally within the province of internal medicine (and surgery).

A little less direct, perhaps, are the effects of mental disability upon the casualties that occur under crowd and mob conditions. As group passions rise, individuals reach the "boiling point"; they abandon ego defenses against murderous drives. Typically the preliminaries to bloodshed are shared by persons who draw back as the crisis becomes more intense. But can we truly say that only those who shed blood give expression to the pathology of man in culture? Or rather shall we say that the culture is itself pathologically organized in the degree that it creates the demands that precipitate crowd and mob action? Moreover, shall we extend this analysis to the "built-in" crises of war and preparation for war?

#### **The "Lunatic Fringe" of Businessmen**

At this point we are moving outside the limits of present-day consensus about the definition of mental disease and defect. Let us look at the impact of psychopathological factors upon some human value other than mental and physical well-being. In recent years we have been opening our eyes to see how mental pathology influences economic life. That it does is obvious when we consider the losses of production that result from absences attributable to a standard mental illness or psychosomatic complaint. The influence is less obvious—though great—in losses from

labor turnover, slowdown, or spoilage. Often the significant factor is a mental difficulty. In connection with labor turnover, for instance, industry and commerce are only too well acquainted with the psychopathic fringe that wanders from job to job and disrupts both discipline and production.

There are, however, features of the business system that are less visible and less welcome subjects of comment. I refer to the wasteful allocation of resources that results from pathologically bad management. In some cases absenteeism, high rates of labor turnover, stoppages and strikes are the direct outcome of the stubbornness of a pathological executive who must look big in order to still inner doubts about his wholeness as a man. In such situations we find that culturally accepted roles are exploited by diseased personalities whose fundamental predispositions were formed in previous cultural situations.

We do not forget to include in the economic cost of mental disability the cost of reallocating resources to effective use. The rigidities of thought so typical of compulsive personalities may delay the adoption of new methods of production or defer the discontinuation of obsolescing products.

Inflexibilities of thought are a root factor in some of the friction that arises in adjusting our economic system to modern conditions. The traditional ideology of recent decades in the business community has been strongly opposed to "encroachment," "intervention," or "interference" by government. Yet we are busy testing new working rules concerning the relationship of business and government. There is a "lunatic fringe" of businessmen whose rigidities of thought are comprehensive only in the light of psychopathology. They need as much attention as the lunatic fringe of labor.

### Respect Competition

Economic aspirations and considerations have been so prominent in America that we have tended until recently to underestimate the importance of other values. The demand for respect is a good example. American life has been highly mobile from an early time. Individual merit has therefore tended to be the measure of worth rather than ancestry. But entrenched privileges of caste and rank are not given up without a struggle.

However, the victims of social mobility in respect relations are not limited to the relics of decayed Southern dynasties or the barnacles on Mayflower families. Positions of respect are highly competitive; social climbing is a national exercise. Many athletes in respect competition pay heavily in mental health. In turn they add asperity to the rise and fall of individuals and groups in the respect system. Those who keep up with the Joneses must often go all the way to the mental hospital.

In this area the woman pays. Women are especially active in respect competition and they often pay in terms of mental health. The repercussions do not stop at that. Studies of middle class families show what often happens when the wife fancies that she is a cut above her husband socially. She not only undermines the authority of the male in the home but may create a pathological environment for the children. Some of the drama of American history has been furnished by the waves of immigrants—usually Europeans, and usually peasants—who have barely had time to settle before they start snubbing more recent arrivals of another faith, syntax, or pigmentation.

Clambering up and slipping down the escalator of respect appears to leave people a bit out of breath. At a given level they act remarkably alike. It is

of interest in this connection that until recently our social psychiatric studies were more conscious of the problems of rebelliousness than of the psychopathology of extreme conformity. The famous shibboleth of "adjustment" as a major goal of therapy is beginning to come in for readjustment in the light of the pathology of conformism. Some specialists have gone so far as to suggest that the social mobility of physicians, clinical psychologists, nurses, and the like might have had something to do with the emphasis upon adjustment—in the past, naturally.

### The Sad State of Affection

It is in the sphere of another value that the impact of mental disability has been most continuously described. I refer to affection and to institutions (like the family, the fraternity, the clique) with which the giving and receiving of affection is closely interwoven. The overwhelming testimony of visitors to our country is that Americans are exceedingly friendly, congenial, open. The characteristic dynamism of American society has made it possible to transform many institutions—once primarily concerned with other values—into situations in which intimacy and congeniality are more important. We are a celebrated nation of joiners. Americans are adept at realizing the economic, political, respect, and related consequences of the personal touch.

Modern medicine has begun to paint a somewhat more sombre picture of the state of affection in this country. Inside observers of family life, for instance, are aware of the jarring effect of neurosis, psychopathic personality, and psychosis on the giving and receiving of affection. As might be inferred from the sale of drugs and medicines a great amount of self-concern among us takes the form of hypochondria. We

also know that many neurotics make affection impossible by demanding its external signs, and by relapsing into querulousness and quarrelsomeness if their exactions are not met. We are well acquainted, too, with the neurotic who appears to make no demands but who manipulates others by sulking and looking hurt at the drop of a fancied slight.

By now it is no news that the study of mental affliction has shown that much of the conduct that appears to be loving is so intermixed with destructiveness that the net impact is largely negative. The classical case—the whipping girl of modern psychiatry—is the mother who smothers her children in overprotection. There is also the less publicized over-considerate husband whose love is a mantle for his jealousy of the potentialities latent in the personality of his wife. Since in this country the female sex has received rather ready access to education, money, and respect, the traditional definition of the women's role has been extensively revised. But there are grave costs of transition. Scientific attention has been given to complications connected with the demand of women to be more "manly" in the traditional sense of the word, and the demand of men to be less so. It is clear that the capacity for love can be contaminated by the anxieties generated by the uncertainties that appear in the course of playing a revised sexual script. The rapid turnover of marriage partners is one of the obvious signs of the stress of intimate human association under current conditions.

#### **Mental Disease's Toll on Talent**

We have become so sensitized to the importance of well-being, economic security, respect, and affection that we do not always emphasize the tie between psychopathology and other significant values and institutions. I am

thinking, for example, of the pursuit of skill in the arts and crafts, in science, and indeed in every expression of human aptitude. Living as we do in the complex and changeable world of science and technology we are aware of the vast array of new skills that rise and sink promptly into oblivion. This is a Skill Society; we are only starting to understand how mental disease cuts down the effective utilization of scarce human talent.

It is generally admitted that the cultivation of American talent in the arts has been handicapped by the pathological sensitivity of many emotionally insecure parents to the appearance of masculinity on the part of their boys. Art is often rejected as effeminate. We know, too, that the failure of many children and young people to succeed in acquiring socially significant skill is connected with the pressure of ambitious parents upon them, and the use of failure as a means of "getting even" with parental authority. Warped incentives carry many millions of talented individuals into dangerously anti-social or utterly trivial activity. Call to mind the pathological element among forgers, counterfeiters, embezzlers, shoplifters, confidence men, burglars, pickpockets, car thieves (and the like). Or think of the addictive attachment of many able people to repetitive routines (like much gambling).

#### **How Rigidity Breeds Lawlessness**

Psychopathology has a complex relation to rectitude. Our nation is well known for the moralizing rhetoric which our spokesmen often use in public places. In private life, too, the language is liberally sprinkled with the terminology of "good" and "bad." However modest our national reputation may be for the cultivation of deep religious experiences, there is no doubt about the evidence for an active sense

of social responsibility. We are generous; we are civic-minded; we are decent. Americans have created an unsurpassed network of voluntary services. The "self" of the generalized American personality unmistakably contains a demand by the self upon the self to imagine the human consequences of conduct and to take the thoughts and feelings of others into account in coming to a conclusion.

When we look more closely at our conceptions of right and wrong we see that they are marked by the traits of a society in transition. Think of the thousands of requirements printed in the statute books and the regulative manuals of the federal government, the states, and local authorities. It is no secret that many of these prescriptions are violated with impunity and whatever penalties there may be are written

off as business costs.

Many mental disorders appear to originate in, or to be complicated by, clashes among rigid and incompatible standards of right and wrong. It is not to be assumed that offenders against our social codes are always pathological. Nor is it to be supposed that those who articulate and apply our codes are free of mental pathology. The neglected importance of the latter appears when we examine the people whose agitation keeps inapplicable rules on the books, or who, acting in the role of judge, prosecutor, or penal official make mechanical applications of specific rules. Such pockets of distorted motivation help to account for the rather astounding fact that our law enforcers are so often put in the position of seeking to apply ordinary sanctions to deter or modify the conduct of offend-

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ers whose difficulty is anchored in a mental disability that immunizes them from such sanctions. For that matter we have barely begun to count the cost of statutes that breed lawlessness, extortion, or coercion; or of modes of dealing with juvenile or adult offenders that turn into finishing schools in criminal activity.

#### **Information at Home and Abroad**

In a swiftly changing and interconnected world we are peculiarly dependent upon the realism, judgment, and promptness of the sources upon which we rely for information. Any indication that mental pathology pollutes the source of enlightenment concerns us all. Members of the general public depend upon the mass media for most of the current intelligence upon which public and private choices are made; we are quite conscious of the communications revolution that brought TV, radio, film, rapid printing, and other devices into common use. Public officials have access to special channels of information about what goes on at home and abroad. They must rely upon diplomats, attachés, and undercover agents, as well as upon a vast machinery for obtaining routine facts about crops, bank deposits, steel production, installment selling, births and deaths, and the like.

Severe restrictions have now been imposed upon the free flow of information across national lines, and also between public officials and private citizens. The Soviet Union excludes visitors from many areas; we have retaliated in kind. Hence our image of the Soviet world and the Soviet image of our world are subject to manipulation by a monopolistic few. Sensing the urgency of national security we have permitted our government to hide itself behind a curtain of secrecy. We are not well-informed about our

gigantic defense establishment; indeed, we are not well enough informed to have a sound judgment of whether the curtain is wisely administered or not.

The study of mental processes has shown how a kernel of realism can be distorted beyond all reasonable limits by pathological drives and mechanisms. Problems of foreign policy and national security are remarkably vulnerable to distortion because it is realistic to be suspicious. After all we live in a world where the expectation of probable violence yet prevails. Furthermore, we know that the instruments of ideological warfare are continually used to spread sedition and prepare treason.

It is rational to investigate the record of anybody who has access to important national secrets. But the stream of information about individuals is contaminated by petty spite and pathological distortion. Some neurotics specialize in sowing suspicion. They pile rumors on top of one another partly to quiet their guilt and fear from the insinuations they have already made. Public officials are sitting ducks for the smears of the ruthless and the fantasies of disabled minds. As the stream of information dries up the rational man is unable to ascertain the truth with which to meet a lie or a fantasy. He is reduced to meeting rumor with rumor, and he may withdraw from the public forum. Thus the diseased and the credulous come to constitute a resonating network of suspicion covering the whole body politic and poisoning the stream of public enlightenment.

#### **Dangers to Democracy**

Democratic government is itself in danger when sources of public information are withdrawn from the free play of competitive observation and reporting. It is true, of course, that a majority can always attack the human dignity of other nations and of minor-



ity groups. Military crisis simply hastens the process by which an intolerant majority can unwittingly undermine democratic government. Wedges driven within the body politic can intensify insecurities to the point of a temporary dictatorship. Temporary dictatorships can change into relatively permanent autocracies. Under crisis conditions political advancement often depends upon ruthlessness. Although non-pathological persons can be realistic enough to be ruthless, ruthlessness is intensely fascinating to some pathological minds. Crises favor the rise of the pathological liar, the agitational fantasm, the persecutory prosecutor, the hanging judge, the arbitrary warden, the sadistic officer.

The creeping crisis in our institutions of popular government is made more complicated by the long-term trend that favors giant bureaucracy. Folklore has supplied us with stereotyped images of the infirmities to which administrative hierarchies are vulnerable: red tape, disregard of the individual, and so on. As big government, big business, big trade unions, big hospitals and clinics multiply in our society a setting is provided in which some mentally disabled persons find themselves "well adjusted." It is vitally important that we learn to structure and manage such activities in ways that overcome or mitigate their dangerous consequences for democracy and for human dignity in general.

I have been reminding you of the complex connections between mental illness and the values and institutions of American civilization. In every sphere we are learning to discern the costly consequences of disorientation. There are direct costs in terms of life and limb, of under-production of goods and services, of the denial of respect on the basis of individual merit, of in-

capacity to give or to receive affection, of failure to develop latent human talent into socially creative skill, of misplaced conceptions of social responsibility, of distorted information, of imperiled popular government. And there are indirect costs in the sense that our ways of life contribute to mental disorder.

It is tempting to hazard a quantitative summary of the cost of mental disease and defect in terms of all values; well-being, production, misplacement of respect, disturbances of affection, perversions of talent, contradictions of social responsibility, distorted information, and damaged democratic process. But a social audit of this far-reaching nature seems premature in the light of present practices of social reporting.

#### Future Outlook

Taking into account the contributions as well as the costs of mental pathology is a particularly difficult operation. Success often comes despite pathology. And success in one role that is partially attributable to the incentives and mechanisms of mental conflict may be counterbalanced by failure in other roles. I recall the judge whose hostilities and guilt were significant features of his widely acclaimed performances on the bench, but whose pathology helped to drive his wife to the hospital and his son into rebellious failure.

Even a cursory glance at the probable future of American society suggests that problems of mental pathology will be more rather than less urgent in the years ahead. We expect more people to live longer, and longer life exposes them to the deprivations of bodily decay and social disesteem. We look forward to fewer hours of work as automation takes over, which means

that the plant or the office will no longer provide a disciplined program of living with rather fixed categories of responsibility. In the transformation of industry we expect more skills relating to production to become obsolescent; new needs call for re-training and reorientation programs reaching people many of whom are relatively rigid personalities. Geographical mobility and urbanization will accentuate the problems connected with respect and affection—as well as inconsistent standards of rectitude. There are no solid grounds for predicting that the world political crisis will go away and leave us alone; the shadow of uncertainty will remain, coupled with the fact of limited access to information and the crippling of popular government.

Perhaps the most disturbing implication of all is what modern science and technology are doing to man's conception of himself. On the one hand are the positive achievements and the gratifications that come from skill. On the other we must list not only the armament race but the status of man as a form of life. Today we are becoming aware of the probability that living forms—perhaps superior to man—are to be found on other planets than ours, and that direct contact is not out of the question. Simultaneously we are devising machines of such subtlety that they are able to out-calculate and in other ways to out-perform man. Experimental embryology is bringing us closer to the development of new species near to or, in various ways, superior to man.

We know that in the relatively brief course of human evolution in biology and culture the theological and metaphysical systems of mankind are numerous. Few of them have prepared the minds of their devotees to take the

changing relationships that we foresee in stride. The Judeo-Christian traditions in particular are vulnerable in the paranoid-like claims that they advance for "chosen" subdivisions of man.

It is fortunate that some of the factors that have in the past interfered with programs of research and action connected with mental illness are of diminishing strength. The old stereotypes are still there ("mad men," "wild men") but they are declining in frequency and intensity of use. The idea that conspicuous disorders of perception, judgment, and expression are illnesses and require professionally competent help is spreading. The older defensiveness about recognizing and admitting mental illness in the family is dwindling away. A psychiatrist is occasionally permitted to appear in a play without speaking broken English or turning out to be madder than his patients.

No group is more aware than the present army of clinicians and investigators in the field of mental health how wide are the gaps between need, knowledge, and performance. Confronted by the mental complications of war and post-war times we recruited an emergency corps of specialists from the clinical National Guard, so to speak, and whatever their original bent we reconverted them on the anvil of short-courses and big assignments into what the nation needed. With more competence, more acceptance, and more facilities the situation has notably improved. That rapid growth carries with it a degree of tension and waste is not surprising. Jurisdictional disputes are a feature of such periods of expansion. But there are signs that as specialists become more secure in skill, money, and prestige, and as more inter-specialties develop, the whole continuum of

pertinent factors in the formation and the therapy of mental disorder will be commonly understood and systematically explored.

Certainly the idea appears to be widely shared that mental disorder is not only "psychic," but "somatic"; not only "psychosomatic," but "socio-psychosomatic." The principal strategies of therapy are rather plainly delimited: somatic intervention; communication; social participation. Dogmatism is diminishing and research on therapy is seeking to discover the indications of which therapeutic strategy (and tactic)—or what mixed strategy—is most likely to succeed. In the same spirit research is going forward on factors that account for mental disorder. A sounder foundation is being laid for strategies of prevention.

To act preventively is to alter the current way of doing things in many situations. We are in the early phases of a vast campaign for the reconsideration and reconstruction of the American way of life. Our specialists on research are part of the institutions of self-survey that are needed to provide us with the stream of information on which sound strategy can be based. In the process we shall clarify the goal values of America; this very process may well prove to be one of the great preventives of mental disability. For the life of man in society is a process of shaping and sharing values. Continuous study is essential to appraise the specific details of institutional practice according to the impact that they have on values. In particular we are determined to explore the interconnections of our ways of life and mental pathology, for one of our basic values has always been the realization of a commonwealth of free men in full possession of their wits.

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